

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American Council of Life Insurers Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City
Sacramento

State
CA

Zip Code
95841

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Michael Thompson

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 01

Transaction ID: 36910105

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Campbell For Congress

Mailing Address 4590 Macarthur Blvd. Suite 500

City
Irvine

State
CA

Zip Code
92660

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. John Campbell

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 48

Transaction ID: 36910114

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Bluegrass Committee

Mailing Address 400 North Capitol Street NW
Suite 585

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement

011

Category/
Type

Candidate Name

Bluegrass Committee

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 36910116

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)